

Inception Report

Cluster Approach Evaluation Phase 2

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1 Context of the evaluation

1. In 2005, the Inter-Agency Standing Committee (IASC) requested an external evaluation of the Cluster Approach after two years of implementation. The evaluation was divided into two phases.
2. Phase one, finalized in 2007, focused on process indicators, the achievements and limitations of the Cluster Approach and lessons learned related to its roll-out. The Cluster Approach Evaluation Phase 1 was conducted by a joint research team from the Overseas Development Institute, the Center on International Cooperation and The Praxis Group, Ltd.
3. Phase two, to be conducted between June 2009 and March 2010, assesses the operational effectiveness and the main outcomes of the Cluster Approach focusing on country level outputs and outcomes. This second phase is carried out by a consortium between the Global Public Policy Institute (GPPi) and Groupe Urgence, Réhabilitation, Développement (Groupe URD). UN OCHA and the Cluster Evaluation Phase 2 Steering Group, which includes representatives from the UN, donors and international NGOs, manage the evaluation.
4. The evaluation will inform decision-makers at both headquarters and field level, including the IASC, the humanitarian organizations participating in the Cluster Approach, UN OCHA, host governments, donors and the wider international and local humanitarian communities.

2 Objectives, scope and limits of the evaluation

2.1 Objective of the evaluation

5. The cluster approach evaluation phase 2 assesses the operational effectiveness and the main outcomes of the cluster approach in order to propose concrete recommendations at the global and country levels for improving the cluster approach. It also assesses the cluster approach’s interaction with other pillars of humanitarian reform and its contribution to an appropriate and coordinated delivery of humanitarian assistance. In addition, the evaluation will contribute to the establishment of cluster-specific outcome indicators which can then be used to create a baseline for future evaluations. As the primary objective of the evaluation is to encourage learning, it aims at identifying factors that hinder or support the cluster approach in achieving its goals.

6. The evaluation focuses on the analysis of country-level findings and aims to bring the reality in the field back to decision-makers at the global level.

2.2 Scope

7. As discussed with and agreed by the Cluster Evaluation Phase 2 Steering Group, the evaluation has the following scope (please see **Annex 1** for a summary of Steering Group discussions provided by OCHA):

8. **Evaluation criteria:** The evaluation assesses the performance of the cluster approach according to the criteria of effectiveness, efficiency, coherence, relevance and effects (rather than “impact”), as defined by the ALNAP guide “Evaluating Humanitarian Action using the OECD-DAC Criteria” (2006).

9. **Geography:** The cluster approach evaluation phase 2 is informed by six country studies, covering different types of emergencies and different stages of implementation of the cluster approach. In addition, evaluators will travel to Geneva, Nairobi and New York to hold meetings and conduct additional phone interviews with stakeholders.

Countries	Selection criteria
Haiti	(Reoccurring) sudden onset / disaster, plus protracted crisis Integrated mission Other coordination mechanisms pre-existing
Myanmar	Sudden onset / disaster, plus protracted crisis in some regions Weak engagement with the government In transition
Chad	Protracted crisis / conflict Integrated mission planned Other coordinating mechanisms pre-existing

Gaza	Protracted crisis / conflict Weak engagement with local authority, engagement with government of Israel
Uganda	Protracted crisis / conflict Strong engagement with government In transition – opportunity to observe full cycle of cluster operation
DRC	Protracted crisis / conflict and disasters Integrated mission Common humanitarian fund

10. **Time:** The country studies focus on the present situation and the work of the clusters during the last or current emergency. Wherever possible, country studies seek to include the situation prior to the introduction of the cluster approach or the situation in areas of the country in which the cluster approach has not been rolled out into the analysis.

11. **Clusters and stakeholders:** The evaluation tries, as far as possible, to provide a comprehensive overview of all clusters activated in and all cross-cutting issues relevant to the six countries. This implies a limited depth of analysis in each individual cluster and issue, but enables the evaluation team to assess inter-cluster issues as well. It will include all relevant stakeholders (cf. stakeholder map, p. 14) into the analysis at the local level in the six country cases and at the global level, including those organizations that participate in the cluster approach and those that do not. Evaluators will seek to gather feedback from implementing partners in the field and affected populations or their representatives in order to verify available data on the scope and quality of humanitarian response and to illustrate other effects of the cluster approach.

12. **Levels:** The evaluation analyzes the effects of the cluster approach on the quality of humanitarian response in terms of gap filling/greater coverage and ownership and connectedness, as well as its effects on the humanitarian system (e.g. relations between humanitarian actors and the capacity of the system to consider intersectoral and interdisciplinary issues). An analysis of the inputs and support provided through the cluster approach and the contribution of the approach to predictable leadership, partnership and cohesiveness and accountability serves to explain findings and create recommendations on how to strengthen the cluster approach.

2.3 Limits of the evaluation

13. The cluster approach evaluation phase 2 is limited by methodological and data issues, as well as financial and capacity constraints. The most important limitations are:

14. **No in-depth country evaluations.** The evaluation team will conduct six country studies, prepare stand-alone country reports on them and present country-specific lessons and, if relevant, recommendations. Yet, the country studies will be conducted with the aim of informing the assessment of the cluster approach as a whole and will not be equivalent to full evaluations of the humanitarian response at country-level.

15. **Limited comparability.** The ability of the evaluation team to conduct comparative analysis is limited by two factors. First, the Cluster Evaluation 2 Steering Group only selected countries in which the cluster approach has been implemented as case studies and thus includes no control group. Moreover, the evaluation team expects that only few actors in the case study countries have experienced humanitarian response both before and after the introduction of the cluster approach. This limits the possibilities for comparing the quality of humanitarian response in areas with to those without the cluster approach. The evaluation team seeks to address this limitation by trying to find in-country control groups and by seeking to identify actors with knowledge of the situation prior to the introduction of the cluster approach. However, a systematic comparison between the cluster approach and alternative approaches will not be possible. Second, the context for humanitarian response varies strongly from case study country to case study country and the number of case examples is limited. A systematic comparison between different settings will therefore be impossible and possibilities to extrapolate findings to the system as a whole will be limited.

16. **No impact assessment and difficulties of attribution.** Directly attributing changes in the dignity and well-being of affected populations to the cluster approach is difficult, if not impossible. The evaluation conducts no comprehensive assessment of impact. Instead, the evaluation seeks to analyze the effects of the cluster approach on the quality of humanitarian response, especially in terms of gaps filled / geographic, thematic and quality of coverage and enhanced ownership and connectedness. The evaluation also collects and analyzes existing data generated or used by country-level clusters to assess their performance relating to the affected population.

17. **Limited involvement of affected populations.** The evaluation seeks to identify the effects of coordination arrangements on the quality of humanitarian response. Affected populations and where applicable the host community will be consulted to validate the level of quality of the response obtained. The evaluation team will not, however, seek the views of affected populations on the coordination arrangements themselves since they are expected to have little information and knowledge of them.

18. **Limited coverage of other elements of humanitarian reform.** The evaluation considers how the cluster approach interacts with other pillars of humanitarian reform, especially concerning predictable financing and the role of Humanitarian Coordinators. However, the evaluation will not provide a full assessment or recommendations on the reform of these other pillars.

19. **Limited depth of cluster-specific analyses.** The evaluation considers all clusters active in the six country cases. This breadth means that the data collected for each individual cluster remains restricted.

20. **Information gaps / problems of data quality / no generation of new technical data for baseline.** The evaluation team collects and compiles relevant available data. However, data may not be available for all relevant questions or may not be of sufficient quality. The evaluation attempts to triangulate data where possible. It does not, however,

create new data relating to humanitarian indicators and standards. Where relevant data for the baseline are not available, the evaluation will recommend which kind of data should be collected in the future.

21. **Limited coverage of indicators.** The Phase Two Cluster Evaluation Framework suggests 47 generic indicators and 55 cluster-specific indicators. Collecting data on all 102 indicators in six countries is not feasible. Instead, the evaluation team merged the 47 generic indicators into 21 comprehensive key indicators related to the evaluation questions (cf. section 3.3 and Annex 5). Most of the cluster-specific indicators provided in the framework are related to those generic indicators, i.e. by assessing predictable leadership, partnership and cohesiveness, accountability, increased coverage and ownership and connectedness for each cluster, most of the proposed cluster-specific indicators are covered. Concerning the effect of humanitarian response on affected populations, the evaluation team will collect technical indicators used at the global level and in the field and data generated through them. Based on these, the evaluation team will propose cluster-specific outcome or effect indicators and present existing baseline data at the end of the evaluation process.

22. **Ongoing changes.** The cluster approach does not represent a set system, but is undergoing constant changes. As a result, the object of the evaluation is a ‘moving target’ and the assessment includes aspects of a real time evaluation. Since there is a time-lag between the implementation of country studies and the finalization of country reports and the synthesis reports, these reports may not always cover recent developments.

3 Methods

3.1 Overall approach

23. The evaluation mainly adopts an inductive approach, using quantitative data where available and relying strongly on qualitative data. Data will be derived from primary and secondary sources, direct observation in the field, key informant interviews and a survey with all stakeholder groups at the global level. The evaluation aims as much as possible to collect empirical evidence, not to report perceptions. When dealing with diverging stakeholder perceptions, the evaluation team will make different positions explicit and explain its own assessment based on the empirical evidence collected.

24. The evaluation approach is based on the logic model contained in the Cluster Approach Evaluation Phase 2 Framework. In order to assess the achievements and shortcomings of the cluster approach, the evaluation team collects evidence at all levels of the results hierarchy, including inputs, outputs/processes, outcomes and intermediate effects, with the exception of “emergency preparedness”, which has been covered in phase 1 of the evaluation. The primary focus of the evaluation is on assessing the effects of the cluster approach in terms of contributing to gaps filled/greater coverage and ownership and connectedness.

25. The evaluation team understands the outputs/processes listed in the logic model as means for achieving the indicated outcomes and intermediate effects. Accordingly, the ultimate purpose of the cluster approach is to achieve better coverage, as well as ownership and connectedness, through stronger predictable leadership, partnership and cohesiveness (which amount to coordination) and accountability. We understand “partnership” as referring to the relationships among humanitarian actors (including UN and non-UN actors, as well as international and local actors participating and those not participating in the cluster approach). “Accountability” involves accountability between clusters and the Humanitarian Coordinator, between cluster members and cluster lead agencies and accountability to affected populations. This last segment of accountability implies a focus on participation. We understand “gaps filled and greater coverage” as referring to greater geographic and thematic coverage, as well as increased quality and more specific targeting of assistance. To the evaluation team, “ownership” refers to national and local governmental and civil society / private institutions, and “connectedness” focuses on the ‘sustainability’ of interventions, rather than their link to other policy areas.

3.2 Key evaluation questions and evaluation criteria

26. The cluster approach evaluation phase 2 focuses on the following main and key evaluation questions, derived from the Terms of Reference, the Cluster Approach Evaluation Phase 2 Framework and comments from the Steering Group:

- What are the effects (intended and unintended) of the activities that have been implemented as part of the cluster approach on humanitarian operations?
- Why? What factors are contributing to or hindering the effective implementation of the cluster approach? Potential factors include:
 - Flexibility of the cluster approach and its effects on the cost-efficiency of cluster activities
 - Level of funding available to clusters
 - Appropriate and sufficient inputs by all relevant organizations
 - Power / financial issues / conflicts of interests between cluster lead agencies and cluster members (e.g. ‘double responsibility’ of cluster lead agencies / organizations)
 - Country-specific challenges such as security and access
 - Motivational factors of participating agencies and staff
 - Consistency with humanitarian mandates and the humanitarian principles etc.
- Is there evidence supporting the assumed causal relationship between the inputs, intended outputs and the objectives of the cluster approach?
- What can be done to enhance the positive effects of the cluster approach and reduce its negative effects, if any?

Key evaluation questions	Criteria
a. To what degree has the cluster approach modified and strengthened the humanitarian response (in terms of gaps filled and greater geographic, thematic and quality of coverage, as well as ownership/connectedness)?	Effectiveness (outcome)
b. What intentional or unintentional positive or negative effects of the cluster approach concerning affected populations, the coordination and interactions among participating organizations and the humanitarian system as a whole can be demonstrated?	Effects (rather than “impact”)
c. How is the cluster approach interacting with the other pillars of humanitarian reform, in particular the HC system and the reformed funding mechanisms and is it implemented in the spirit of the ‘Principles for Partnership’?	Coherence
d. To what degree has the cluster approach achieved the intended outputs (predictable leadership, partnership/cohesiveness, accountability)?	Effectiveness
e. Does the cluster approach enable participating organizations to deliver better response through coordination and information sharing?	Relevance
f. What kind of support have global clusters delivered and how effectively has it been used at the country and field levels? Which inputs included in the generic TORs have not been provided?	Efficiency

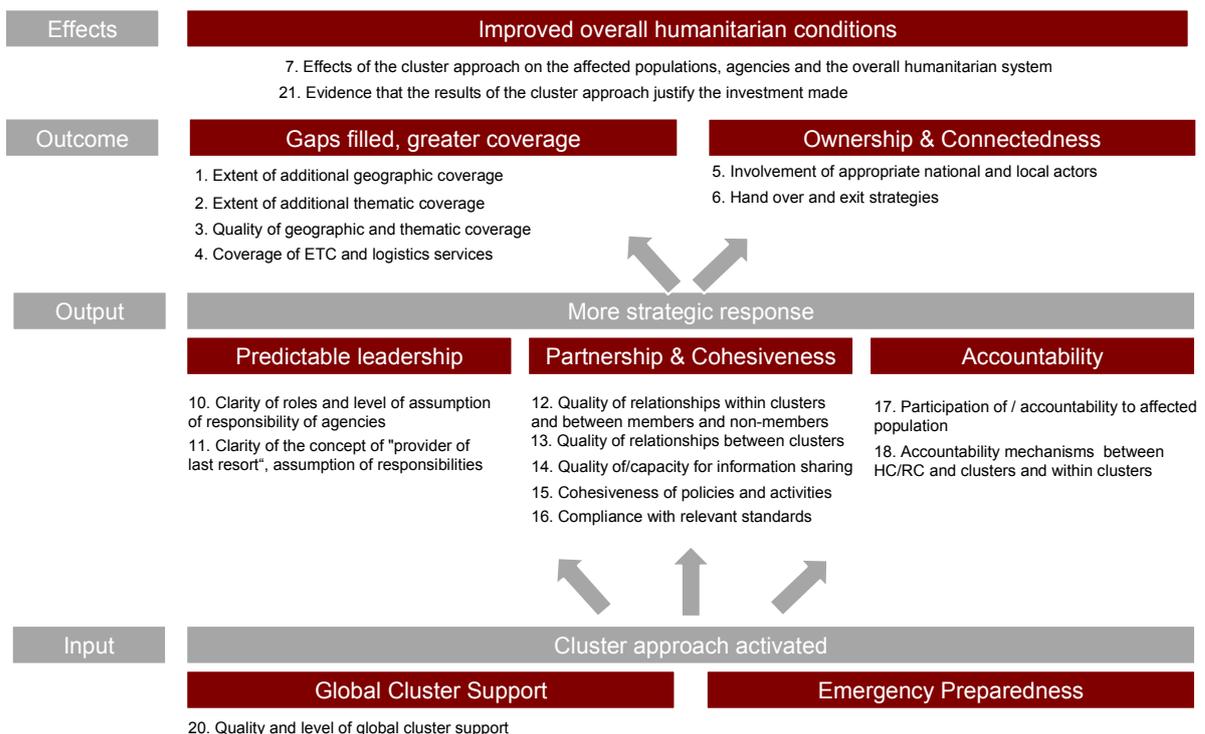
g. Is there evidence that the results of the cluster approach justify the inputs of major stakeholders such as the IASC, NGOs, host communities and donors at the country level?	Efficiency
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3.3 Performance criteria / indicators and explanatory factors

27. For all evaluation criteria and key evaluation questions described above, the evaluation team has developed and operationalized a set of generic indicators (see **Annex 5**). These indicators are based on the logic model and the preliminary indicators provided in the Cluster Approach Evaluation Phase 2 Framework. The evaluation team has taken this initial set of indicators, operationalized them and, by taking up many issues in the scales, reduced the total number of indicators significantly, while covering almost all issues contained in the original set. The numerical scales provided (0 to 3) are ordinal and will not be aggregated in the end-result. Rather, the scales will be used to present complex and detailed information in a compact way through figures and illustrations.

Illustration 1 shows how the indicators relate to the different parts of the logic model.

Illustration 1: Indicators in the logic model

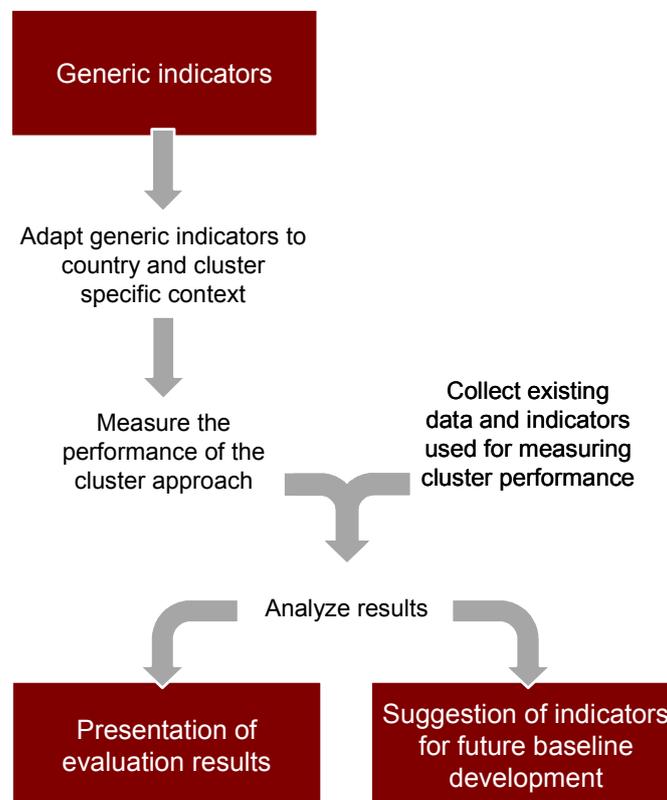


28. The indicator list in Annex 5 also contains detailed questions pointing to potential data points that can be used to assess the 21 indicators. Country study teams in consultation

with relevant field staff¹ will adapt these questions and data points to the individual country and cluster contexts in order to evaluate the outcomes (coverage, ownership and connectedness) and outputs (predictable leadership, partnership and cohesiveness, and accountability) of individual clusters. Additionally, the evaluation team will collect existing technical (outcome and effects oriented) indicators for all relevant clusters used at global and country level to complete the assessment. Based on these and the generic indicators, the evaluation team will propose a set of cluster-specific indicators as one of the results of the evaluation that can be used to create a baseline for future evaluations.

Illustration 2 depicts the envisaged process and results.

Illustration 2: Approach to indicators



29. Finally, the evaluation addresses contributing and hindering factors for the implementation of the cluster approach. To identify these independent variables, the evaluation team will formulate hypotheses that guide data collection at the country and global levels. On the basis of the first three country studies and research on the global level, the evaluation team will assess possible independent variables in an internal workshop. The team

¹ The evaluation team will circulate the complete list of indicators among stakeholders in case study countries subsequent to the Steering Group meeting on August 27th.

will apply the techniques of counterfactual analysis² and randomized variables³ in order to identify omitted variables and select the most relevant independent variables. The subsequent three country studies will generate additional empirical evidence to determine the relevance of these factors.

3.4 Data collection tools

30. The evaluation team will work with relevant secondary and primary data from the country and the global level. The data will be collected as follows:

31. **Secondary data:** An important source of information for the evaluation will be secondary data, created by others than the evaluators. This data includes documents (meeting notes, situation reports, monitoring data, evaluation results, existing statistics, appeal documents etc.) and relevant literature provided at country and global level. Data will be collected from relevant stakeholders (e.g. through the Web Library) and through research.

32. **Primary data:** The evaluators will create primary data through four main tools: semi-structured interviews, direct observation, discussions with the affected populations and a survey. Due to the scope of the evaluation, limited resources and limited time spent in case study countries, it is impossible to create primary technical quantitative data. Most primary data generated will be qualitative.

- **Semi-structured interviews:** The interviews will be guided by the evaluation indicators and the related questions (cf. Annex 5). They aim to complement the information collected through the analysis of secondary data, to test hypotheses, to triangulate results and to create buy-in of the different stakeholders. Interviews will be held at the global (Europe and New York), regional (Nairobi) and country levels (Uganda, Myanmar, Chad, Haiti, oPt, DRC). As much as possible, interviewees will be selected to cover different kinds of stakeholders (see stakeholder map on p. 14) and clusters. Additionally, **feedback sessions** will be conducted at the end of each field mission with key stakeholders. The aim of these group discussions is to jointly work on possible solutions to identified weaknesses.
- **Direct observation at country level:** The evaluators will select programs to visit during field missions. This will give opportunities to make direct observations about the crisis context, and program activities and achievements. The data will be used to triangulate secondary data and information gathered through interviews. In addition, the

² A counterfactual analysis is an analysis that tries to trace a causal chain after changing an important variable. E.g. what would have happened if cluster x and cluster y in country z would not have been merged?

³ Working with randomized variables means to introduce random independent variables in order to test the relevance of existing independent variables and identify possible omitted variables. E.g. what results would independent variable y have, if we would observe it not once (during the field trip) but every month?

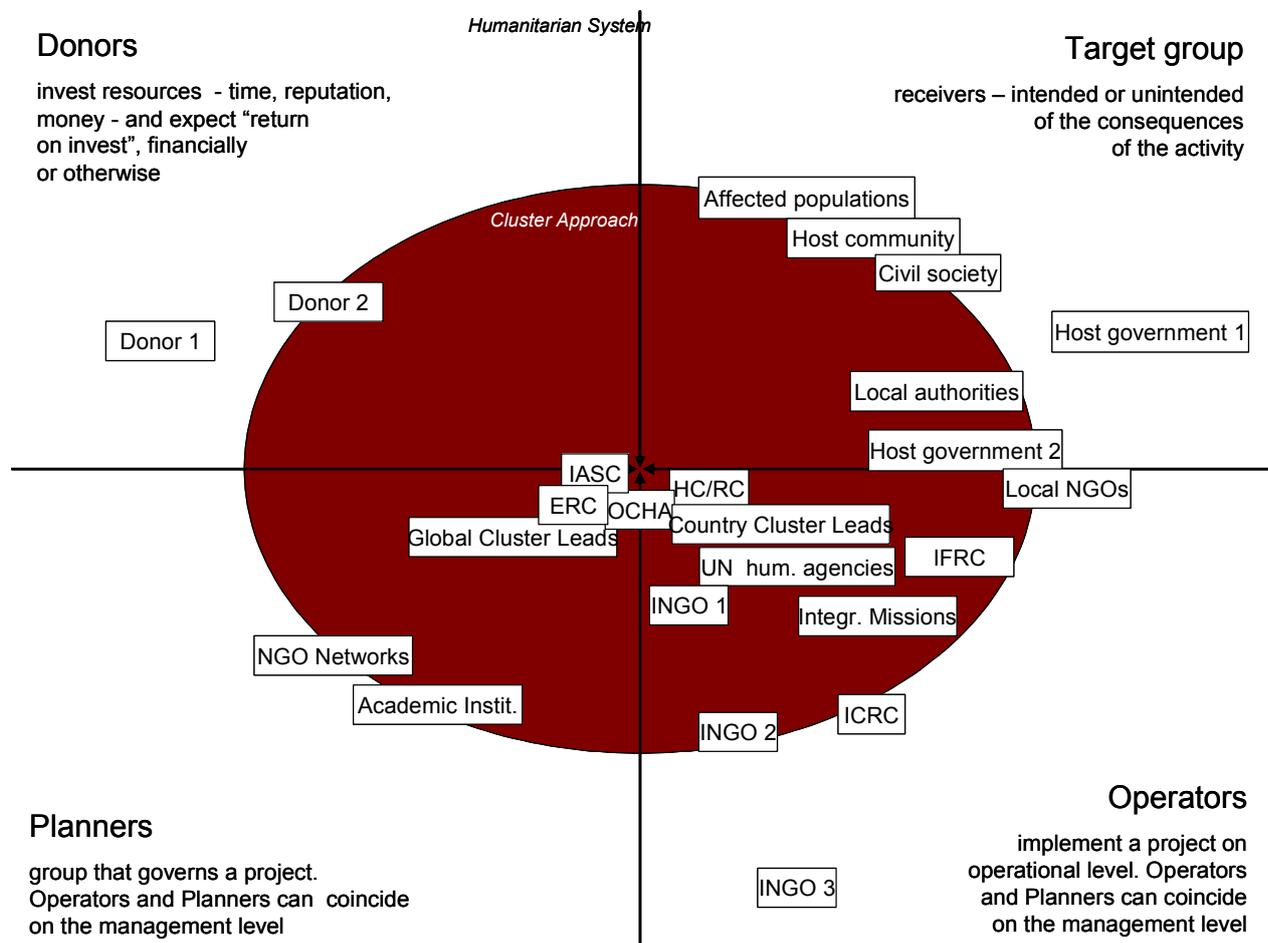
evaluators will attend as observers selected meetings (e.g. senior management meetings, humanitarian country team meetings, intra- and inter-cluster meetings), workshops and trainings during field missions.

- **Discussions with affected populations / host communities:** Due to the design and key evaluation questions of the evaluation, the interaction with affected populations will be limited. However, particularly when trying to determine the effects of the cluster approach, the affected populations and host communities are very important interlocutors to verify findings and collect illustrations and stories. In particular, affected populations in protracted crises or frequently reoccurring disasters can often remember humanitarian response efforts before the introduction of the cluster approach and are thus especially valuable sources of information concerning changes in humanitarian assistance over time. To gather the views of affected populations, the evaluators will select several affected camps, sites, villages or other locations at which humanitarian assistance is provided in each country with a view to covering different circumstances and different levels of performance (as well as, where possible, areas where the cluster approach has been implemented and where it has not). The evaluators will conduct interviews with representatives of affected populations. In addition, they will visit relevant sites and hold conversations with randomly selected individuals. In particular, the evaluators will rely on three participatory tools: historical timelines (an analysis of the different phases of humanitarian action, attempting to track changes and identify correlations with the introduction of the cluster approach), mappings to verify the gap filling efforts, and Venn diagrams to trace how affected populations understand “coordination” and interagency relations.
- **Survey** of relevant stakeholders at the global / headquarter level: The survey will include organizations participating in the cluster approach and humanitarian actors not participating in the cluster approach, and working in countries with and without the roll-out of the cluster approach. Data will be used to complement data already collected at field level and at global cluster level. The questionnaire will be drafted after the first round of field missions to fill identified gaps in data collection.

3.5 Organization of the evaluation

33. A consortium between the Global Public Policy Institute (GPPi) / Groupe Urgence, Réhabilitation, Développement (Groupe URD) carries out the evaluation. The team of eight evaluators is led by Julia Steets (global team leader) and François Grünewald (technical team leader). The evaluation is overseen by a task team at UN OCHA led by Claude Hilfiker and a Steering Committee comprised of stakeholders from the UN, donors and NGOs.

Illustration 3: Stakeholders of the cluster approach



34. The evaluation team will consult representatives of the main stakeholder groups as depicted in the preliminary stakeholder mapping below (illustration 3). For each country study, a separate stakeholder map or overview will be created. Before departing from each case study country, the evaluation team will hold a debriefing session for key stakeholders.

35. The evaluation team is convening an advisory group, which will act as a sounding board for ideas and provide relevant technical expertise and contacts. The advisory group will comprise approximately eight individuals, chosen to complement the composition of the Steering Group. Confirmed members of the Advisory Group to date include Anne Bauer (former head of the international department of the Norwegian Red Cross and former head of the FAO Emergency Division), Siobhán Foran (Gender Advisor, currently serving as GenCap Advisor to the Global Clusters in Geneva and Gender Focal Point for the revision of SPHERE standards and the INEE Minimum Standards), Mukesh Kapila (former head of DFID humanitarian branch, former assistant to the SRSG in Afghanistan, former RC/HC for Sudan, former special advisor of the WHO Health in Crisis Unit and currently Special Advisor of the Executive Secretary of the IFRC), Kate Farnsworth (OFDA, special DART team advisor) and Hugues Maury (former MSF official, specialist in quality management, special advisor of Groupe URD on quality issues).

5 Reports and dissemination

36. Based on the Terms of Reference, the Approach Evaluation Phase 2 Framework and this Inception Report, the evaluation team will submit the following reports to the OCHA task manager and the Steering Group:

- Six country reports, containing findings and recommendations of individual country studies
- Synthesis report, containing common country findings, results of global-level analysis and recommendations for global stakeholders
- Data compendium to the reports, containing relevant data in an easy-to-use format.

37. The evaluation team will submit all reports in good Standard English. In addition, the terms of reference for the evaluation, the Cluster Approach Evaluation Phase 2 Framework, the Inception Report, the executive summaries of all country reports, the executive summary of the synthesis report and the full country reports on Chad, DRC and Haiti will be submitted in French. The reports will conform to the Standards for Evaluation in the UN System and the ALNAP Quality Proforma.

38. The main findings and recommendations of the evaluation will be presented to the Cluster Evaluation Phase Two Steering Group, as well as to the IASC Working Group. Following acceptance by the Steering Group, the reports, recommendations and data will be made publicly available at www.gppi.net/consulting/cluster_approach/. Moreover, GPPi and Groupe URD will disseminate evaluation results through their institutional networks and partner organizations and may present findings at additional relevant meetings.

Annex 1: Acronyms

ALNAP	Active Learning Network for Accountability and Performance in Humanitarian Action
CE2	cluster approach evaluation phase 2
CE2StG	Cluster Evaluation phase 2 Steering Group
COB	close of business
DRC	Democratic Republic of Congo
ERC	Emergency Response Coordinator
ETC	Emergency Telecommunications
GHP	Global Humanitarian Platform
GPPi	Global Public Policy Institute
HC	Humanitarian Coordinator
IASC	Inter-Agency Steering Committee
INGO	International Non-Governmental Organization
IR	Inception Report
NGO	Non-Governmental Organization
OCHA	United Nations Office for the Coordination of Humanitarian Affairs
OCHA ESS	OCHA Evaluation and Studies Section
OECD-DAC	Organisation for Economic Co-operation and Development – Development Assistance Committee
RC	Regional Coordinator
TORs	Terms of Reference
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
URD	Groupe Urgence – Réhabilitation – Développement
WHO	World Health Organisation

Annex 2: Summary of Steering Group Discussions

The following summary of Steering Group discussions was sent to all participants by UN OCHA:

- Apart from some discussion points mentioned below, there was wide agreement with the proposed inception report (IR), especially in view of the presented timeline, the scope and products, as well with the indicated limitations stated in the IR.
- The CE2StG welcomed the reduction of indicators carried out by the GPPi&URD group.
- It was agreed that the GPPi&URD group will further refine the specific cluster indicators. In this regard, WHO and UNHCR expressed the wish that GPPi&URD is consulting them to this effect.
- There was agreement that the Phase II evaluation should concentrate on outcomes of the cluster approach, rather than on processes (as defined in the Logic Model of the Evaluation Framework).
- It was discussed that it will be difficult for the evaluation to generate a baseline for future evaluations and that this would be a project in itself. However, the evaluation will develop indicators that can be used as a basis for monitoring Cluster performance in the future.
- Members of the CE2StG highlighted that the evaluation should not forget to also assess the interplay of the cluster approach with other pillars of the humanitarian reform.
- Moreover, it was reiterated that the evaluation should contain a “cost-benefit” analysis of the cluster approach.
- The IR should further develop how to address the strategic aspects of mainstreaming cross-cutting issues in the work of Clusters and elaborate in more detail, how the gender aspect will be incorporated into the evaluation.
- There was agreement that the CE2StG & the GPPi&URD group should keep all relevant stakeholders in the field informed about the upcoming evaluation and that cluster specific indicators should also be discussed with them.
- There was also agreement that the GPPi&URD group will set up a technical advisory group (separate from the CE2StG), which will review the methodological and technical approach from the group (peer to peer review function).

Action Points

1. The CE2StG will provide written comments on the IR to OCHA ESS until COB 31 July.
2. The GPPi&URD group will incorporate these comments into the IR as appropriate and the report will be shared anew with the CE2StG.
3. It was agreed to hold the next CE2StG meeting on 27 August, between 15:00-16:30 with the objective to finalize the Inception Phase.
4. OCHA ESS will organize that the main documentation of the CE2 gets translated into French
5. GPPi&URD will forward a leaflet (draft attached) about the project to the CE2StG with the request to distribute it to interested stakeholders. If no comments received by deadline of 31st July, we will consider that this leaflet is endorsed by the CE2StG.

Annex 3: Draft Outline Country Reports (~ 25 pages)

Executive summary, including key findings and references to their sources (~ 3 pages)

1. Country context (~1 page)
 - Nature & history of the emergency
 - Description of humanitarian response (who, what, for how long?)
 - Coordination modalities before the introduction of the cluster approach
 - Box: usual modalities of cluster approach at the global level
 - Status of the cluster approach (from when on implemented, which clusters activated, led by whom, main activities?)
2. Purpose, scope and method (~ 2 pages)
3. Findings (~ 17 pages)
 - What kind of support from global clusters have country and field clusters received (standards, good practice, operational support, guidance and training) and how have they used this support?
 - To what degree have the reform measures achieved the intended outputs (predictable leadership, partnership/cohesiveness, accountability)
 - How is the cluster approach interacting with the other pillars of humanitarian reform, in particular HCs, funding mechanisms and the principles of partnership of the Global Humanitarian Platform in this country context?
 - To what degree has the cluster approach strengthened the humanitarian response (in terms of gaps filled/greater coverage, ownership/connectedness)?
 - Has the implementation of the cluster approach had any demonstrable intermediate effects on affected populations in individual clusters and cross-cutting issues?
 - What intentional or unintentional positive or negative effects of the cluster approach concerning affected populations, the coordination and interactions among participating organisations and the humanitarian system as a whole can be demonstrated?
 - What factors are contributing to or hindering the effective implementation of the cluster approach in the case study country (including global cluster support)?

- Through which mechanisms is the cluster approach contributing to or hindering the delivery of more effective and efficient assistance in the case study country?
4. Conclusions and recommendations (~ 2 pages)
- Is there evidence supporting the assumed causal relationship between the inputs, intended outputs and the objectives of the cluster approach / is there evidence that the activities of the cluster approach contribute to increasing coverage, filling gaps, and enhancing ownership and connectedness?
 - Have the outcomes justified the investment (from global clusters and other actors such as the IASC, UN agencies, NGOs, governments and donors) thus far?
 - Recommendations (where appropriate): How can humanitarian response and the cluster approach be strengthened in this country and field context through actions from: The global cluster lead agencies; country and local cluster lead agencies; the Humanitarian Coordinator; NGOs (international and local); host government (national and local); other humanitarian actors?

Annex: List of persons interviewed and consulted and sites visited

Annex: Original Terms of Reference for the evaluation

Annex: Abbreviations

Annex 4: Draft Outline Synthesis Report (~ 36 pages)

Executive summary, including key findings and references to their sources (~ 4 pages)

Preface (~ 3 pages)

- What was the set-up of the evaluation, how has it been carried out, how is it linked to other evaluations (HRR and phase 1)?
- What were the main risks of the evaluation?
- Scope, limitations and methods of the evaluation

1. Introduction (~ 2 pages)

- Why was the cluster approach introduced and what was it intended to achieve?
- What clusters exist and what are the other critical elements of humanitarian reform?
- Where has the cluster approach been implemented, over what time-period and what are its usual implementation modalities?
- Where has the cluster approach not been introduced and why?
- What has been done so far to strengthen the cluster approach and enhance its effectiveness (including which of the recommendations of the evaluation phase 1 have been implemented)?

2. Findings (~ 23 pages)

- What kind of support have global clusters delivered and how effectively has it been used at the country and field levels?
- To what degree have the reform measures achieved the intended outputs (predictable leadership, partnership/cohesiveness, accountability)?
- How is the cluster approach interacting with the other pillars of humanitarian reform, in particular HCs, funding mechanisms, Global Humanitarian Platform in this country context?
- To what degree has the cluster approach strengthened the humanitarian response (in terms of gaps filled/greater coverage, ownership/connectedness)?
- Has the implementation of the cluster approach had any demonstrable intermediate effects on affected populations in individual clusters and cross-cutting issues?

- What intentional or unintentional positive or negative effects of the cluster approach concerning affected populations, the coordination and interactions among participating organisations and the humanitarian system as a whole can be demonstrated?
 - What factors are contributing to or hindering the effective implementation of the cluster approach in the case study country (including global cluster support)?
3. Conclusions and recommendations (~ 4 pages)
- What has been achieved to date?
 - Is there evidence supporting the assumed causal relationship between the inputs, intended outputs and the objectives of the cluster approach / is there evidence that the activities of the cluster approach contribute to increasing coverage, filling gaps, and enhancing ownership and connectedness?
 - Summary of main recommendations for country and field levels
 - Is the cluster approach meeting the stated expectations of key stakeholders and do the outcomes and effects justify the investment (from global clusters and other actors such as the IASC, UN agencies, NGOs, governments and donors) thus far?
 - Recommendations for individual clusters, including cluster leads and co-leads and cluster members, the IASC, HCs and the ERC and OCHA: Can and should the cluster approach be further strengthened at the global level to improve humanitarian assistance? If so, why and how? If not, why not and what are the alternatives? What more or else should global cluster lead organizations do to ensure stronger clusters at field level and to ensure their activities are cost-effective? What should other organizations, including NGOs and host governments or communities do to make the cluster approach more effective?

Annex: PPT data compendium

Annex: List of persons interviewed and consulted and sites visited

Annex: Original Terms of Reference for the evaluation

Annex: Abbreviations

Annex 5: Indicators, see separate excel file